

CLAIMS ONLY							Application Number <i>10-759747</i>	Filing Date	
							Applicant(s)		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments		
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep
1			1						
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Total Indep	3		5						
Total Depend	24		28						
Total Claims	27		33						